

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	dw	68904	2/29/00
O.I.P.E. CLASSIFIER		48	3/9/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		109452	4-24-00 05/16/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	1/8
2	1/22
3	1/22
4	1/22
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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